



# The California Department of Fish & Game Invites you to take the Departmental Transfer Examination for Staff Service Analyst



FINAL FILING DATE: Continuous



*Department of Fish and Game employees are committed to managing and protecting California's diverse wildlife and the habitats upon which they depend.*

## Position Information

**Who Should Apply:** Competition is limited to Department of Fish and Game employees who meet the requirements to laterally transfer to the Staff Services Analyst (SSA) classification. State Personnel Board Rules 425, 430-433, 435 and 444 contain general provisions for lateral transfer.

**Salary Ranges:** Range A: \$2817 - \$3426 per month. This range shall apply to those individuals who do not meet the criteria for Range B or Range C.

Range B: \$3050 - \$3708 per month. This range shall apply to persons who have satisfactorily completed the equivalent to six months of Staff Services Analyst (General) or Staff Services Analyst, Fair Political Practices Commission, or Management Services Technician (Range B), and may apply to persons who have the equivalent of six months of satisfactory experience outside of State service performing analytical personnel, budget, or administrative duties similar to those of a Staff Services Analyst.

Range C: \$3658 - \$4446 per month. This range shall apply to persons who have graduated from a recognized four-year accredited college or university; or who satisfactorily completed the equivalent of 12 months of Staff Services Analyst (Range B) or Staff Services Analyst, Fair Political Practices Commission (Range B), experience; and may apply to persons who have the equivalent of 18 months of satisfactory experience outside the State service performing analytical personnel, budget, or administrative duties similar to those of Staff Services Analyst (General).

## How to Apply for this Examination

**Filing Period:** Applications will be accepted continuously. The cutoff date for this round of testing is **May 8, 2009**. Applications received after that date will be held until the next round of testing.

**How to Apply:** **You must complete the SSA Transfer Exam Request Form (FG-HRB-569) attached.** The SSA Transfer Exam Request Form (FG-HRB-569) must be POSTMARKED by the U.S. Postal Service, PERSONALLY DELIVERED, OR RECEIVED VIA INTER-OFFICE MAIL.

Department of Fish and Game  
Attention: Exam Unit  
1416 Ninth Street, Room 1217  
Sacramento, CA 95814

Do **not** submit a Standard State Application form Std 678.

You may also obtain a SSA Transfer Exam Request Form (FG-HRB-569) at Department of Fish and Game offices, or you can download one from the web at [http://dfgintranet/Portal/Portals/0/HR/docs/FG-HRB-569SSATransferForm\\_1.pdf](http://dfgintranet/Portal/Portals/0/HR/docs/FG-HRB-569SSATransferForm_1.pdf)

**Accommodations for Persons with Disabilities:** If you have a disability that requires accommodation, mark the appropriate box on the SSA Transfer Exam Request Form. You will be contacted to make specific arrangements.

## ***Requirements for Admittance to the Examination***

**Requirements for Admittance to the SSA Transfer Exam:** You must meet the requirements to laterally transfer into the SSA class by the date you submit your SSA Transfer Exam Request Form (FG-HRB-569). Appropriateness of lateral transfer into the SSA class will be verified by the Human Resources Branch upon receipt of the completed SSA Transfer Exam Request Form (FG-HRB-569).

## ***Examination Information***

**Type of Examination:** The examination will consist of a written test weighted pass or fail.

**Examination Dates:** The written test date for this round of testing is to be determined. Candidates will receive written notice of testing no less than five working days before their scheduled date.

**Scope of Examination:**  
(STUDY THIS to prepare for examination.)

1. Quantitative Analysis
2. Data Analysis and Interpretation
3. Workload Management/Project Management Scenarios

**Length of List Eligibility:** A passing score on the written transfer exam is indefinite.

## ***Questions?***

If you have any questions concerning the Staff Services Analyst transfer examination please contact Cynthia Keisler, [ckeisler@dfg.ca.gov](mailto:ckeisler@dfg.ca.gov), Human Resources Branch at (916) 653-8120. You may also visit our website at [www.dfg.ca.gov](http://www.dfg.ca.gov).

### **California Relay (Telephone) Service for the Deaf or Hearing-Impaired**

**From TDD phones: 1-800-735-2929**

**From voice phones: 1-800-735-2922**

THE DEPARTMENT OF FISH AND GAME OFFERS EQUAL OPPORTUNITY TO ALL REGARDLESS OF SEX, MARITAL STATUS, RACE, COLOR, RELIGION, POLITICAL AFFILIATION, NATIONAL ORIGIN, ANCESTRY, AGE, SEXUAL ORIENTATION, DISABILITY, OR MEDICAL CONDITION.

IT IS THE OBJECTIVE OF THE STATE OF CALIFORNIA TO ACHIEVE A DRUG-FREE STATE WORK PLACE. ANY APPLICANT FOR STATE EMPLOYMENT WILL BE EXPECTED TO BEHAVE IN ACCORDANCE WITH THIS OBJECTIVE BECAUSE THE USE OF ILLEGAL DRUGS IS INCONSISTENT WITH THE LAW OF THE STATE, THE RULES GOVERNING CIVIL SERVICE AND THE SPECIAL TRUST PLACED IN PUBLIC SERVANTS. APPLICANTS FOR STATE SERVICE ARE EXPECTED TO BE DRUG-FREE.



**DEPARTMENT OF FISH AND GAME  
REQUEST FOR TRANSFER EXAM  
STAFF SERVICES ANALYST (GENERAL)**



NAME (Last)	(First)	(M.I.)	LAST 4 DIGITS OF SOCIAL SECURITY NUMBER
MAILING ADDRESS (Number)			WORK TELEPHONE NUMBER
(Street)			( )
(City)	(County)	(State)	HOME TELEPHONE NUMBER
(Zip Code)			( )

**ANSWER THE FOLLOWING QUESTIONS:**

1. Are you now employed by the Department of Fish and Game? ☐ YES ☐ NO

Division/Branch/Region :

Position Number:

2. Do you need reasonable accommodation to take a written test? ☐ YES ☐ NO  
(If "Yes", you will be notified to make special arrangements)

**QUALIFICATION FOR LATERAL TRANSFER:** Consideration for lateral transfer is based on the last appointment by certification or Board action.

**EMPLOYEE SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**APPLICANTS--DO NOT USE THE SPACE BELOW--FOR HUMAN RESOURCES USE ONLY**

**TRANSACTIONS**

CLASSIFICATION OF LAST APPOINTMENT BY CERTIFICATION OR BOARD ACTION (A01)	
TRANSFER RANGE VERIFIED BY	
<input type="checkbox"/> ACCEPTED	<input type="checkbox"/> REJECTED

**EXAMS**

DATE TEST SCHEDULED	DATE NOTIFIED OF TEST
SCORED BY	
TOTAL POINTS	<input type="checkbox"/> PASSED <input type="checkbox"/> FAILED
DATE SCORE ENTERED	DATE RESULTS SENT